

STATE OF ALABAMA

DEPARTMENT OF MENTAL HEALTH

RSA UNION BUILDING

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May 28, 2014

To: MAS/MATT Nurses

From: Vanessa B. Prater, BSN, RN, MATT

Director, NDP

Re: Updates

Over-the-counter medications (OTC meds)

A MAS RN/LPN may place a *prescribed*, factory labeled, factory sealed, single dose **OR** multidose bottle of over-the counter, as needed (PRN) medications in a plastic bag with a closure. Each consumer must have their own individual bag of over-the-counter medications.

The bag, with a closure, shall be labeled with the consumer's name, facility/program name, date over-the-counter medications were placed in the bag by the MAS RN/LPN only.

The MAS RN/LPN shall check expiration dates on *all* medications, initial the plastic bag <u>and</u> enclose a copy of the prescriber's standing orders inside the plastic bag with the over-the-counter medications.

Each consumer may now have their own multidose bottle of PRN, OTC medications. Due to Medicaid changes related to medication coverage, multidose bottles of prescribed, PRN, OTC may be purchased for each consumer as needed. The medication name and dosage part of the label placed on the bottle at the factory must read the same as the prescriber's standing orders. MAC Workers are trained to compare the label on the bottle to the order on the MAR.

NO BULK OR STOCK MEDICATIONS OF ANY KIND ARE ALLOWED TO BE USED BY MAC WORKERS IN COMMUNITY RESIDENTIAL PROGRAMS.

Do not resuscitate (DNR) orders

Do not resuscitate orders should be reviewed with the prescriber, consumer/family/significant other. Agency policy and procedures, approved by the agency's Board of Directors, should address the process for handling any do not resuscitate order. The treatment team, including MAS Nurses, should follow the agency's policy and procedure related to this issue.

Prescription fill/refill time limit

Once a medication order is received from a prescriber, the order should be initiated as soon as possible. If any delay in initiating a medication order is anticipated due to pharmacy having to order medication, pharmacy hours of operation, etc., the MAS Nurse should inform the prescriber of the issue and obtain an order from the prescriber to "start medication when received". This prevents medication errors due to missed doses and ensures the prescriber is aware of the delay in initiating/continuing treatment.

<u>Use of personal cell phones to transmit personal health information (PHI) including pictures of consumer's body</u>

Reference Source: Royal College of Nursing (RCN) Position Paper

There are a number of issues to be taken into account if nursing staff do use their personal mobile phones for work-related purposes:

- 1. Employer's Policy RCN advises that nursing staff should adhere to their employer's policy on mobile phone use.
- Security and confidentiality of patient information RCN advises that nursing staff do not use their personal mobile phones for recording, transmitting or storing patient identifiable information at any time.
- 3. Staff safety

RCN advises nursing staff to withhold their personal number from patients and families. Appropriate work contact details should be provided instead.

4. Infection control

RCN advises use of standard precautions when using equipment such as mobile phones and computer keyboards/tablets. Precautions include had washing before direct contact with patient and after any activity that contaminates the hands and regular cleaning of the equipment with detergent and disinfectant wipes used in line with the manufacturer's instructions.